COMPLETE IF KNOWN

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

Attorney Docket Number

First Named Inventor

Application Number

Declaration	Declaration	Filing Date	09/22/03	
Submitted OR	Submitted after Initial Filing (surcharge	Art Unit		
with Initial Filing	(37 CFR 1.16 (e)) required)	Examiner Name		
As the below named inventor, I here	by declare that:	· · ·		
My residence, mailing address, and cit	izenship are as stated belov	w next to my name.		
I believe I am the original and first inve	entor of the subject matter w	hich is claimed and for whi	ch a patent is soug	ht on the invention entitled:
Billiard Tro	iining Bal	.(
	(- 11 - 54 - 1-			·
the specification of which	(Title of the In	ivention)		
is attached hereto				
•				
OR was filed on (MM/DD/YYYY)		as United States A	pplication Number	or PCT International
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).
I hereby state that I have reviewed and any amendment specifically referred to	d understand the contents on above.	f the above identified speci	ification, including t	he claims, as amended by
I acknowledge the duty to disclose info applications, material information which international filing date of the continual	h became available betwee tion-in-part application.	n the filing date of the phor	application and the	e national of PC1
I hereby claim foreign priority benefits breeder's rights certificate(s), or 365(s States of America, listed below and h breeder's rights certificate(s), or any claimed.	under 35 U.S.C. 119(a)-(d) a) of any PCT international	application which designate the checking the box any fi	ated at least one of preion application to the contract of th	for patent, inventor's or plant
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
Additional foreign application nul		emental priority data sheet	PTO/SB/02B attac	hed hereto:

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

little of invention 13: 11 and Iraining Ball
As the below named inventor(s), I/we declare that:
This declaration is directed to:
The attached application, or
Application No, filed on,
as amended on(if applicable);
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.
FULL NAME OF INVENTOR(S)
Inventor one: John Cianflone
Signature: John Canflowe Citizen of: U.S.A.
Inventor-two:
Signature: Citizen of:
Inventor three:
Signature: Citizerref:
Inventor four:
Signature: Citizen of:
Additional inventors are being named onadditional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numbe or Bar Code Labe	·	OR 🔀 Cor	теspondence address below
Name John Cianflone			
Address P.O. Box 275			
chy Rockville	Si	tate MO	ZIP 20848
Country USA Tele	202. 8 aphone 301. 2	82.3749 55.6929	Fax
I hereby declare that all statements made herein of my o are believed to be true; and further that these statement made are punishable by fine or imprisonment, or both, us validity of the application or any patent issued thereon.	ts.were made with the	e knowledge that willful false	statements and the like so
NAME OF SOLE OR FIRST INVENTOR :	A petition has	been filed for this unsign	ned inventor
Given Name (first and middle [if any]) John Stever	Fa or	amily Name	flone
Inventor's John Canflone			Date 09/22/03
Residence: City Washington, D.C.	(D.C.)	Country USA	Citizenship USA
Malling Address P.O. Box 275	·		·
city Rockville	State M N	ZIP 20848	Country USA
NAME OF SECOND INVENTOR:	A petition has be	een filed for this unsigne	ed inventor
Given Name (first and middle [if any])		mily Name Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
Additional inventors are being named on thesup	pplemental Additional	Inventor(s) sheet(s) PTO/SB/	02A attached hereto.

Please type a plus sign (+) inside this box Under the Paperwork Reduction Act of 1995, no persons a	re required to respo	U.S. F	Patent and Trademark Offi	ce: U.S	PTO/SB/02A (11-00) igh 10/31/2002. OMB 0651-0032 DEPARTMENT OF COMMERCE ntains a valid OMB control number.
DECLARATION			ADDI	TION	AL INVENTOR(S) emental Sheet e of

Name of Additional Joint Inventor, if ar	ıy:	□ A	petition has been filed	for this	s unsigned inventor
Given Name (first and middle [if any])		Family Name	or Sur	name
Inventor's Signature					Date
Residence: City	State	Cou	untry	CI	tizenship
Malling Address					
Mailing Address			NA		
City	State	ZI	IP C	ountry	
Name of Additional Joint Inventor, if ar			petition has been filed t		unsigned inventor
Given Name (first and middle [if any]	1)	$\overline{}$	Family Name	or Su	mame
Inventor's Signature					Date
Residence: City	State	Co	ountry		Citizenship
Mailing Address					
Mailing Address					
City	State		ZIP	Coun	try
Name of Additional Joint Inventor, if a	ny:	Àp	petition has been filed fo	or this (unsigned inventor
Given Name Arst and middle [if any])		Family N	ame or	Sumame
	·				
Inventor's Signature					Date
Residence: City	State	c	ountry		Citizenship
Mailing Address					
Mailing Address					
. City	State		ZIP	Cou	untry

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box	this box —
---	------------

PTO/SB/02B (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Supplemental Priority Data Sheet

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
				9 0
	NK			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.